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FEB 19 2004 #8

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicant(s): Kiyoko Karusawa

Examiner: Eugene Yun

Serial No.: 09/782,905

Art Unit: 2682

Filed: February 14, 2001

Docket: 14318

For: PORTABLE TELEPHONE  
WITH ORIGINATOR  
ACKNOWLEDGE FUNCTION

Dated: February 19, 2004

OFFICIAL 2/21/04

Confirmation No.: 3208

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450**REQUEST FOR RECONSIDERATION UNDER 37 C.F.R. § 1.112**

Sir:

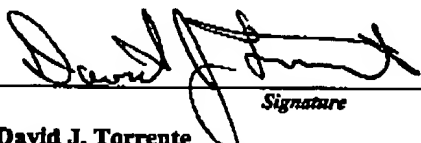
This paper is responsive to the Office Action mailed 20 November 2003 in the above-captioned application. Favorable reconsideration and withdrawal of all rejections is kindly requested in light of the following remarks.

**CERTIFICATION OF FACSIMILE TRANSMISSION**

I hereby certify that this paper is being facsimile transmitted to the Patent and Trademark Office on the date shown below.

Dated: February 19, 2004

  
David J. Torrente

<b>AMENDMENT TRANSMITTAL LETTER (Large Entity)</b>				Docket No. <b>14318</b>	
Applicant(s): <b>Kiyoko Karusawa</b>					
Serial No. <b>09/782,905</b>	Filing Date <b>2/14/2001</b>	Examiner <b>Eugene Yun</b>		Group Art Unit <b>2682</b>	
Invention: <b>PORTABLE TELEPHONE WITH ORIGINATOR ACKNOWLEDGE FUNCTION</b>					
<b><u>TO THE COMMISSIONER FOR PATENTS:</u></b>					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
<b>CLAIMS AS AMENDED</b>					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
<b>TOTAL CLAIMS</b>	<b>8 -</b>	<b>20 =</b>	<b>0 x</b>	<b>\$18.00</b>	<b>\$0.00</b>
<b>INDEP. CLAIMS</b>	<b>2 -</b>	<b>3 =</b>	<b>0 x</b>	<b>\$86.00</b>	<b>\$0.00</b>
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					<b>\$0.00</b>
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT</b>					<b>\$0.00</b>
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. <b>19-1013/SSMP</b> <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.					
 _____ Signature			Dated: <b>February 19, 2004</b>		
<b>David J. Torrente</b> Registration No. <b>49,099</b>  Customer Number: <b>23389</b>					
<div style="border: 1px solid black; padding: 5px; width: fit-content; margin: auto;">         I certify that this document and fee is being deposited          on _____ with the U.S. Postal Service as          first class mail under 37 C.F.R. 1.8 and is addressed to the          Commissioner for Patents, P.O. Box 1450, Alexandria, VA          22313-1450.           _____          Signature of Person Mailing Correspondence           _____          Typed or Printed Name of Person Mailing Correspondence       </div>					
cc:					



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**To:** Examiner Eugene yun  
Group Art Unit: 2682

**From:** David J. Torrente

**Fax:** 703-872-9306

**Pages:** 9 including cover

**Phone:**

**Date:** 2/19/2004

**Re:** Kiyoko Karusawa  
U.S. Patent Appin. No. 09/782,905  
Our Docket: 14318

**CC:**

**XX Urgent**   ☐ **For Review**   ☐ **Please Comment**   ☐ **Please Reply**   ☐ **Please Recycle**

Dear Sir:

The following is attached hereto:

1. Amendment Transmittal in duplicate
2. Request for Reconsideration under 37 CFR 1.112
3. Certificate of Facsimile in duplicate

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